

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

ORR, STACY D., ET AL

Serial No.: 10/791,411

Filed: 3/2/2004

APPARATUS FOR DISPENSING VIALS

Docket No.: 34218-CNT

Confirmation No.: 2558

Group Art Unit No.: 3653

Examiner: BOLLINGER, David H.

TRANSMITTAL

Transmitted herewith are: Transmittal; Amendment Transmittal Letter (1 Page);
Amendment (7 Pages); \$100.00 Additional Claim Fee; and return postcard.

EL 973753258 US

Express Mail No.

Respectfully submitted,

HOVEY WILLIAMS LLP

Dated: January 12, 2005

by

Thomas B. Luebbering, Reg. No. 37,874

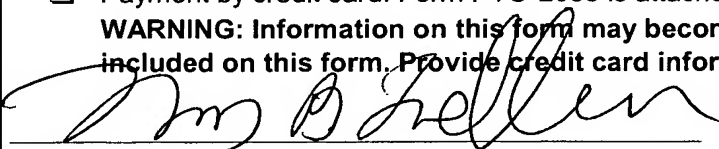
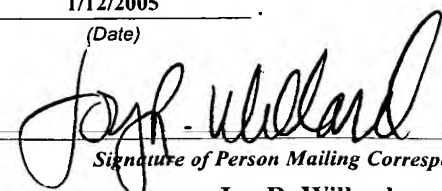
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816/474-9050

ATTORNEYS FOR APPLICANT

AMENDMENT TRANSMITTAL LETTER (Small Entity)					Docket No. 34218-CNT	
Applicant(s): Stacy D. Orr et al					JAN 12 2005	
Application No. 10/791,411	Filing Date 03/02/2004	Examiner Bollinger, David H.	Customer No. 23589	Group Art Unit 3653	Confirmation No. 2558	
Invention: APPARATUS FOR DISPENSING VIALS						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	5 -	20 =	0	x \$25.00	\$0.00	
INDEP. CLAIMS	4 -	3 =	1	x \$100.00	\$100.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$100.00	
<input type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input checked="" type="checkbox"/> A check in the amount of \$100.00 to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-0522 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature Thomas B. Luebbering, Reg No. 37,874 HOVEY WILLIAMS LLP 2405 Grand Boulevard, Suite 400 Kansas City, MO 64108-2519 (816) 474-9050			Dated: January 12, 2005 <div style="border: 1px solid black; padding: 5px;"> I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on 1/12/2005 (Date)  Signature of Person Mailing Correspondence Joy R. Willard Typed or Printed Name of Person Mailing Correspondence </div>			
cc:						